PART B - FEE(S) TRANSMITTAL

(Complete and send t	his form, together wit	h applicable f	ee(s), to: <u>N</u>	<u>Iail</u>	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg	r Patents		
	·			or]	<u>Fax</u>	(703) 746-4000			
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.									
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	75	590 01/14/2005	- 1	APR 2:5 20	ne 🐑	have its own certificate	of mailing or transmission.	in or formal drawing, must	
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PITTSBURGH, PA 15213				-Office	•	Tracey L.		(Depositor's name)	
4/26/2005 HVUDNG2 00000003 190737 09356086						Traces L.	(Signature)		
FC:1501 1400.00 DA					April 18, 2005			(Date)	
2	C:8001 30.00 APPLICATION NO.	FILING DATE		FIDST NAME	D INVEN		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
L		07/16/1999	FIRST NAMED INV						
	09/356,086	SETH REDMORE			FORE-56	7325			
TITLE OF INVENTION: HARDWARE BASED SECURITY GROUPS, FIREWALL LOAD SHARING, AND FIREWALL REDUNDANCY									
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L	APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PL	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	NO	\$1400		\$0		\$1400	04/14/2005	
	EXAM	EXAMINER AI			CI	ASS-SUBCLASS]		
	WRIGHT, N	NORMAN M	2134			713-201000	-		
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list									
CFR 1.363).								M. Schwartz	
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PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.					2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
Administration of the second o									
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the deciment has been filled for									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								o z O	
Marconi Communications, Inc. Warrendale, Pennsylvania									
ni a balan sa a									
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.									
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	Authorized Signature	(down Sch	want			Date	1/18/05		
	•	Ansel M. Schwa	artz		-		No. 30,587		
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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